

## SAFETY INFORMATION CHECKLIST FOR EMPLOYERS WITH STUDENTS IN OFF-CAMPUS WORK PLACEMENTS

This checklist is a guide for informing students of safety requirements at your workplace. Please complete it and return it to the Off-campus Coordinator. Thank you for ensuring the safety of our students.

Student's Name: \_\_\_\_\_

Work Placement Title: \_\_\_\_\_

Employer: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

Date Beginning Work Placement: \_\_\_\_\_

Off-campus Coordinator \_\_\_\_\_

Place a check mark in each box to indicate that the topic has been covered with the student. Where the procedure does not apply, check the N/A box.

1. Explain the company's safety procedures including

- ☐ On the job training/orientation
- ☐ Safety Meetings
- ☐ Accident reporting

2. Personal Protective Equipment

- |   |                              |
|---|------------------------------|
| <input type="checkbox"/> Hard Hat                         | <input type="checkbox"/> N/A |
| <input type="checkbox"/> Safety Glasses                   | <input type="checkbox"/> N/A |
| <input type="checkbox"/> High Visibility Vests            | <input type="checkbox"/> N/A |
| <input type="checkbox"/> Protective Gloves                | <input type="checkbox"/> N/A |
| <input type="checkbox"/> Required Footwear                | <input type="checkbox"/> N/A |
| <input type="checkbox"/> Respiratory Protective Equipment | <input type="checkbox"/> N/A |
| <input type="checkbox"/> Appropriate Clothing             | <input type="checkbox"/> N/A |
| <input type="checkbox"/> Other Protective Equipment       | <input type="checkbox"/> N/A |

3. Incidents and "Near Misses"

- ☐ When to report an injury
- ☐ How to report an injury
- ☐ To whom an injury should be reported
- ☐ Reporting "near misses"

## **SAFETY INFORMATION CHECKLIST FOR EMPLOYERS WITH STUDENTS IN OFF-CAMPUS WORK PLACEMENTS**

### **4. Hazards Related to Specific Job Duties**

Example: If the student uses a fork lift at work, what are the hazards and how are incidents avoided.

- ☐ Physical Hazards (ladders, vehicles, machines, tools, electricity, repetitive work hot oil, weld flashes, reaching, bending, etc.)
- ☐ Chemical Hazards (cleaning chemicals, toxic substances, dust, paint, etc.)
- ☐ Biological Substances (bacteria, viruses, fungi, mold, insects, etc.)

### **5. First Aid Supplies and Training**

- ☐ Location of First Aid Supplies
- ☐ Names of people with first aid training

### **6. Emergency Plan**

- ☐ Exit locations
- ☐ Use of firefighting equipment (extinguishers hose, etc)
- ☐ Specific procedures (medical, fire, incident)

### **7. Vehicle Safety Check Procedures**

- ☐ Safety regulations regarding operation of all vehicles used on the job ☐ N/A
- ☐ Operating license appropriate for vehicle(s) ☐ N/A

### **8. Personal Work Habits**

- ☐ Consequences of horseplay and not following safety rules
- ☐ Inattention
- ☐ Good housekeeping practices
- ☐ Proper lifting techniques

Supervisor's Signature \_\_\_\_\_

Student Worker's Signature \_\_\_\_\_

Adapted from: X-TREME SAFETY  
Alberta Employment and Immigration